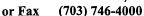
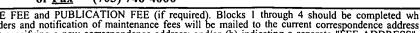
## PART B PEE(S) TRANSMITTAL

Complete and send this form, together

h applicable fee(s), to: Mail

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Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 02/03/2004 7590 Royal W Craig Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO, on the date indicated below. Law Offices of Royal W Craig Suite 153 10 North Calvert Street (Depositor's na Baltimore, MD 21202 Low offices of Royal W. Crair (Signat (D APPLICATION NO. FILING DATE FIRST NAMED INVENTOR EY DOCKET NO CONFIRMATION NO. ATTOR 10/009,866 07/22/2002 Derek Nigel Leggett SENSOR-PCT-1 6594 TITLE OF INVENTION: OPTO-ELECTRICAL ACTUATION SYSTEM AND METHOD SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE APPLN. TYPE nonprovisional NO \$1330 05/03/2004 \$1330 \$0 **EXAMINER** ART UNIT CLASS-SUBCLASS LEE, PATRICK J 2878 250-221000 Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the 1 Low Spices of Royal W. Gary CFR 1.363). names of up to 3 registered patent attorneys or ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity □ governm 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. ☐ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. A The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number (enclose an extra copy of this form). Advance Order - # of Copies Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Authorized Signature) (Date) 04/29 05/06/2004 FMETEKI2 00000092 10009866

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